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APPLICANTS

Patrik Algotsson, Stockholm, SWEDEN;
 Karin Andersson, Hasselby, SWEDEN;
 Hans Norstrom, Solna, SWEDEN;

None

** CONTINUING DATA *****

** FOREIGN APPLICATIONS ***** *T.D*
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IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no	STATE OR COUNTRY SWEDEN	SHEETS DRAWING 2	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 2
35 USC 119 (a-d) conditions met <input checked="" type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged <i>[Signature]</i> Examiner's Signature	<i>[Initials]</i> Initials			

ADDRESS

Andreas Grubert
 Baker Botts L.L.P.
 One Shell Plaza
 910 Louisiana
 Houston, TX
 77002-4995

TITLE

Method to provide a triple well in an epitaxially based CMOS or BiCMOS process

FILING FEE RECEIVED 900	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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